Complete if Known

10/569,319

PTO/SB/17 (01/06)

Approved for use through 07/31/2008. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

- 100 =

4. OTHER FEE(S)

/ 50 =

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): FEE FOR RCE

OFEE TRANSMITTAL  for FY 2007				Application Number 10/569,319				
				Filing Date	February 22, 2006 Alexandros Tourapis			
				First Named Inventor				
JUL 2 5 2011 <sup>없</sup>			Examiner Name		Emmanuel Bayard			
, <i>\(\mu\)</i>					2611			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit				
TOTAL AMOUNT OF	F PAYMENT	(\$) 810.0	00	Attorney Docket No.	PU040213; Customer No. 24498			
METHOD OF PAYMENT (c	heck all that ap	oly) CUSTO	MER NUMB	ER: 24498				
		] Money Or	der	☐ None	Other (p	lease identify):		
Deposit Accounting For the above-ider Charge fee Charge and fee(s) under SWARNING: Information Information and authorities	ntified depositions  e(s) indicate  y additiona  7 CFR 1.16  on this form r	it account, the E ed below I fee(s) or und 3 and 1.17 nay become pub	oirector is hereb erpayments o	of 🛛 Credit any	ck all that ap e(s) indicated overpaymen	ply) d below, <b>excep</b> nts	CENSING LLC t for the filing fed	
FEE CALCULATION	(All the fees	below are due	upon filing or	may be subject to	a surcharge.	)		
1. BASIC FILING, SE			FEES					
	FILING F	EES Small Entity	SEAR	CH FEES Small Entity	EXAMINATION FEES Small Entity		ntity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
A EVOCES OF AIM E	EEC					Small E	Entity	
2. EXCESS CLAIM FI	EES			· · .		Fee (\$) Fee (\$)		
<b>Fee Description</b> Each claim over 20 (inclu	dina Paiccuae				-	50	25	
Each independent claim	_					200	100	
Multiple dependent claim		<b>3</b> ,				360	180	
Total Claims		tra Claims	Fee (\$)	Fee Paid (\$)	<u>1</u>	Multiple Depende		
- or HP = highest number of t	r HP =	d for if greater tha	\$50	= _\$	<u> </u>	Fee (\$)	Fee Paid (\$)	
in - nighest number of t					_			
Independent Claims		tra Claims	Fee (\$) \$200	Fee Paid (\$) = 0				
- O	r HP = ndependent cl	aims paid for, if gr		=				
3. APPLICATION SIZ								
If the specification and	d drawings ex	ceed 100 shee	ts of paper (exc	cluding electronically	filed sequen	ce or computer		
listings under 37 CFR sheets or fraction ther	1.52(e)), the	application size	e fee due is \$25	50 (\$125 for small en	tity) for each	additional 50		
Total Sheets	Extra Sh	eets Nu	ımber of each	additional 50 or fra	ction thereo	f <u>Fee (\$)</u>	Fee Paid (\$)	

SUBMITTED BY					
Name (Print/Type)	GUY H. ERIKSEN	Registration No. (Attorney/Agent)	41,736	Telephone	(609) 734-6807
ature	1 1 1 1 S	6.1			July 20, 2011

(round up to a whole number) x

- \$810.00

Fees Paid (\$)

\$810.00

This collection of information is required by 37 CFR), 13<sup>3</sup> The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR), 1.14. This confection is estimated to take 30 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tractedmark Officer, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450, DN NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, if you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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JUL 2 5 2011 14

PROPERTY TRADENT

## **FEE TRANSMITTAL**

for FY 2007

☐ Applicant claims small entity status. See 37 CFR 1.27

810.00

JOTAL AMOUNT OF PAYMENT

	Complete if Known			
Application Number 10/569,319				
Filing Date	February 22, 2006			
First Named Inventor	Alexandros Tourapis			
Examiner Name	Emmanuel Bayard			
Art Unit	2611			
Attorney Docket No.	PU040213: Customer No. 24498			

METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER: 24498							
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):							
Deposit Account: Deposit Account Number 07-0832  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2038.							
FEE CALCULATION	(All the fees	below are due	upon filing or n	nay be subject to	a surcharge.)		
1. BASIC FILING, SE	LING, SEARCH, AND EXAMINATION FILING FEES Small Entity		FEES SEARCH FEES Small Entity		EXAMINA'	stity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
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Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	Ο.	0	0	0	
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claims  Multiple dependent claims  Total Claims  - or HP =							
Total Sheets	Extra She			Iditional 50 or frac		<u>Fee (\$)</u>	Fee Paid (\$)
- 100 =		/ 50 =	(round	d up to a whole nur	mber) x	<b>C</b>	_ =
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing	surcharge):Fl	EE FOR RCE		- \$810.00	D		\$810.00